

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant(s): NORRIS et al.

Application No.:

Filed:

Title: PARTITIONED VECTOR  
PROCESSING

Attorney Docket No.: CML00104D

Group Art Unit:

Examiner:

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Dear Sir:

This Information Disclosure Statement is submitted:

☒ under 37 CFR §1.97(a), or

(Accompanies the new patent application submitted herewith.)

☐ under 37 CFR 1.97(b), or

(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last.)

☐ under 37 CFR 1.97(c) together with either a:

☐ Statement under 37 CFR 1.97(e), or

☐ a \$180.00 fee under 37 CFR 1.17(p), or

(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first.)

☐ under 37 CFR 1.97(d) together with a:

☐ Statement under 37 CFR 1.97(e), and

☐ a \$180.00 fee set forth in 37 CFR 1.17(p).

(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee.)

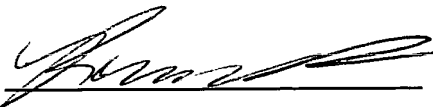
☒ Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

It is requested that the information disclosed herein be made of record in this application.

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail EU621276719US in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit: September 8, 2003

Typed Name: Renee Michelle Larson

Signature: 

Respectfully submitted,



Renee Michelle Larson

Attorney/Agent for Applicant(s)

Reg. No. 36193

Date: September 8, 2003

Telephone No.: 301-668-3073

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Substitute for form 1449A/PTO				<b>Complete if Known</b> <b>Application Number</b> <b>Filing Date</b> <b>First Named Inventor</b> <b>Art Unit</b> <b>Examiner Name</b> <b>Attorney Docket Number</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>				James M. NORRIS      CML00104D	
Sheet	1	of	2		

[illegible][illegible]

Examiner Signature		Date Considered	
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04.

<sup>3</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup>For Japanese patent documents, the indication of the year

of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup>Kind of document by the appropriate symbols as indicated

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				<b>Application Number</b>	
				<b>Filing Date</b>	
				<b>First Named Inventor</b>	James M. NORRIS
				<b>Group Art Unit</b>	
				<b>Examiner Name</b>	
Sheet	2	of	2	<b>Attorney Docket Number</b>	CML00104D

[illegible]

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